



100 Grand Street, New Britain Connecticut 06050 1860-225 Abgh - www.nbgh.org Laurence-A. Tanner, President

July 22, 2005

Cristine A. Vogel, Commissioner Office of Health Care Access 410 Capital Avenue, MS #13HCA P.O. Box 340308 Hartford, Connecticut 06134-0308

RE: New Britain General Hospital Sleep Lab Expansion in Bristol

Dear Commissioner Vogel:

Enclosed are the original and 5 copies of the Letter of Determination submitted on behalf of New Britain General Hospital regarding our proposal to open a satellite sleep center in Bristol. We respectfully request OHCA's favorable determination to waive the CON process so that we can provide this service without further interruption to our patients.

If you require any additional information about this proposal, please contact Claudio Capone, Director of Management Systems/Planning at (860) 224-5279.

Sincerely,

Laurence A. Tanner

President

cac



100 Grand Street, New Britain, Connecticut 06050 860-225-3bgh - www.nbgh.org

Laurence A. Tanner, President

July 22, 2005

Cristine A. Vogel, Commissioner Office of Health Care Access 410 Capital Avenue, MS #13HCA P.O. Box 340308 Hartford, Connecticut 06134-0308

RE:

New Britain General Hospital Sleep Lab Expansion in Bristol

Dear Commissioner Vogel:

I would like to express my strong support for the expansion of our New Britain General Hospital Sleep Disorders Center in the Town of Bristol. We have operated one of the only fully accredited centers in Connecticut for over 15 years and are virtually at full capacity. Our neurologists provide the professional oversight to our unit and also serve the Bristol community. With our needs and Bristol Hospital's desire to provide sleep studies locally, the proposed expansion is a perfect solution to both our needs and another example of cooperative solutions to meet community care.

With support from the physicians at the sleep center and from Bristol Hospital, we feel that establishing a satellite sleep center in Bristol will better meet the needs of our patients. I respectfully request a favorable determination by OHCA on this matter.

Sincerely,

Laurence A. Tanner

President

cac



State of Connecticut Office of Health Care Access CON Determination Form Form 2020

2005 JUL 29 AM

All persons who are requesting a determination as to whether a CON is required for a proposed project must complete this form. Completed forms should be submitted to the Commissioner of the Office of Health Care Access, 410 Capitol Avenue, MS#13HCA, P.O. Box 340308, Hartford, Connecticut 06134-0308.

SECTION I. PETITIONER INFORMATION

If more than 2 Petitioners, please attach a separate sheet of paper and provide additional information in the format below:

Company of the Compan	Petitioner	Petitioner
Full legal name	New Britain General Hospital	
Doing Business As		
Name of Parent Corporation	Central Connecticut Health Alliance	
Mailing Address, if Post Office Box, include a street mailing address for Certified Mail	100 Grand Street New Britain, CT 06050	
Petitioner type (e.g., P for profit and NP for Not for Profit)	Non-Profit	
Name of Contact person, including title	Claudio A. Capone Director of Planning	
Contact person's street mailing address	100 Grand Street New Britain, CT 06050	
Contact person's phone, fax and e-mail address	(phn) (860) 224-5279 (fax) (860) 224-5740 ccapone@nbgh.org	

SECTION II. GENERAL PROPOSAL INFORMATION

a.	Proposal/Project Title: New Britain General Hospital Sleep Lab Expansion						
b.	Location of proposal (Town including street address): 420 North Main Street Bristol CT 06010						
C.	List all the municipalities this project is intended to serve: <u>Bristol, Burlington, Plainville, Thomaston, Harwinton, Farmington, Wolcott and Southington</u>						
d.	Estimated starting date for the project: 10/01/2005						
e.	Type of Entity: (Please check <i>E</i> for Existing and <i>P</i> for Fapply)	Proposed in all the boxes that					
	Acute Care Hospital Behavioral Health Provider Hospital Affiliate E P Imaging Center Ambulatory Surgery Other (specify): ION III. EXPENDITURE INFORMATION	E P					
a.	Estimated Total Capital Expenditure/Cost: \$	<u>524,625</u>					
b.	Please provide the following breakdown as appropriate: (may not represent the aggregate shown above)						
	New Construction/Renovations	\$396,125					
	Medical Equipment (Purchase)	\$107,500					
Imaging Equipment (Purchase)							
	Non-Medical Equipment (Purchase)	\$21,000					
Sales Tax							
	Delivery & Installation						
	Total Capital Expenditure \$524,625						
	Fair Market Value of Leased Equipment						
	Total Capital Cost	\$524,625					

Major Medical and/or imaging equipment acquisition:

Equipment Type		Name	Model	Number of U	Jnits	Cost per unit	
Note:	Provid	e copy of co	ntract with	vendor for	r medical equipm	ant	
NOIE.		, ,			medical equipm	CIII.	
C.	Type	of financing of	or funding s	source:			
	\boxtimes	Operating F	unds		Lease Financin	g 🗌	Conventional Loan
		Charitable (Contribution	ns 🗌	CHEFA Financ	ing 🗌	Grant Funding
		Funded Dep	oreciation		Other (specify)	<u> </u>	

SECTION IV. PROPOSAL DESCRIPTION

Please attach a separate 8.5" X 11" sheet(s) of paper and provide no more than a 2 page description of the proposed project, highlighting all the important aspects of the proposed project. Please be sure to address the following (if applicable):

- 1. Currently what types of services are being provided? If applicable, provide a copy of each Department of Public Health license held by the Petitioner.
- 2. What types of services are being proposed and what DPH licensure categories will be sought, if applicable?
- 3. Will you be charging a facility fee?
- 4. Who is the current population served and who is the target population to be served?
- 5. Who will be providing the service?
- 6. Who are the payers of this service?

See Attachment A

SECTION V. AFFIDAVIT

Applicant:	New Brit	ain General Hospi	<u>tal</u>	
Project Title:	New Britain Ge	eneral Hospital Sle	ep Lab Expansion	
I, <u>David R.</u> (Name	Newton	,(Positi	on – CEO or CFO)	
of <u>New Brita</u>			y sworn, depose and state that t	the
information pro	vided in this CO	N Determination f	orm is true and accurate to the b	est of my
knowledge, and		tain General Hosp acility Name)	ital complies with the appropri	ate
and applicable	criteria as set fo	orth in the Sections	s 19a-630, 19a-637, 19a-638, 19	∂a-639, 19a-
486 and/or 4-18	31 of the Conne	cticut General Sta	tutes.	
01			·	
Signature	1216		7/29/2005 Date	
Subscribed and	d sworn to befor	e me on 7/2	7/05	
		, *		
Notary Public/C	2 7 Jan Commissioner of	いたべ f Superior Court		
My commission	ı expires:	JOYCE M. HAV NOTARY PU MY COMMISSION EXPIRES	BLIC	

Form 2020 Revised 7/02

Attachment A

NEW BRITAIN GENERAL HOSPITAL LETTER OF INTENT BRISTOL SLEEP LAB

PROJECT DESCRIPTION

Introduction

In this Letter, New Britain General Hospital is announcing its proposal to expand its Sleep Lab in order to meet the increased demand experienced over the last several years and to address a need in the Bristol community through a mutually supported program.

Proposed Sleep Lab Expansion

New Britain General Hospital's Sleep Disorders Center is one of the largest and most respected in the state of Connecticut today. At the Sleep Disorders Center at New Britain General a multidisciplinary team is available to diagnose and treat patients. The team includes three board – certified Sleep Center physicians, registered technologists, and representation from Neurology, Pulmonary Medicine, ENT, Orthodontics, Psychiatry and Psychology, and a Medical Director, Marc Kawalick, M.D. The Sleep Disorders Center at New Britain General Hospital has received certification of accreditation from the American Academy of Sleep Medicine, one of a limited number of accredited programs in the state. As an accredited center, New Britain General Hospital has demonstrated special knowledge in Sleep Medicine. In addition, the experience and competency of the medical and technical staff, the physical environment, the medical management of patients, and the technical capabilities of the center all conform to the high standards of the American Academy of Sleep Medicine.

As demand for such services has grown across the state, many of our fellow hospitals have recently opened or renovated their sleep labs. Bristol Hospital has seen this demand grow in its service area and has watched as patients have had to seek services elsewhere. In order to meet patient need, New Britain General Hospital, with the full support of Bristol Hospital and its medical staff, intends to open a sleep lab in Bristol. This new sleep lab will function as an extension of the Sleep Disorders Center at New Britain General. The supplies, business functions and staff will be supplied by New Britain General Hospital. A limited liability corporation will be setup to provide construction, facility, equipment and sundry support services to the sleep lab. New Britain General Hospital will be the primary investor and will fund this project through its own equity.

Conclusion

This proposal will have no adverse affect on the delivery of care as well as no significant impact on rates or patient charges. We respectfully request a determination by the Office of Health Care Access to waive the CON process on the expansion of the Sleep Disorders Center into a Bristol location.

Supplemental Information:

1. Currently what types of services are being provided? If applicable, provide a copy of each Department of Public Health license held by the Petitioner.

New Britain General Hospital is licensed as an acute care hospital. It offers a broad range of acute care services in the inpatient and outpatient settings. The Sleep Disorders Centers offers diagnosis of sleep apnea, narcolepsy, restless leg syndrome and periodic limb movement disorder, parasomnia and insomnia.

A copy of the Department of Public Health license held by this facility is presented in Attachment B.

2. What types of services are being proposed and what DPH licensure categories will be sought, if applicable?

No change in the services offered at this facility is proposed in this application.

In this proposal, the Applicant is seeking to expand its Sleep Disorders Center in order to better meet the current and future demand of patients in the Bristol Hospital service area.

No new DPH licensure categories are being sought.

3. Will you be charging a facility fee?

There will be no change in the way the hospital charges for its sleep lab service as a result of this proposal.

4. Who is the current population served and who is the target population to be served?

Currently, the population utilizing this service is primarily from the New Britain General Hospital, Bradley Memorial Hospital and Bristol Hospital market. The proposal is intended to better serve these patients by providing more capacity in a convenient location in Bristol.

5. Who will be responsible for providing the service?

New Britain General Hospital will be responsible for providing this service.

6. Who are the payers of this service?

The payer sources for services rendered at the Sleep Disorders Center at New Britain General Hospital are displayed in <u>Attachment C.</u> Payer mix is not expected to be impacted by the facility project.

Attachment B

Placeholder for DPH License

Attachment C

	Current <u>Mix</u>
Medicare	41.27%
Medicaid	19.96%
Champus	0.07%
Total Gov't	61.31%
Commercial	36.39%
Self Pay	1.47%
Worker's comp	0.33%_
Total Non Gov't	38.19%
Uncompensated Care	0.50%
	100.00%

STATE OF CONNECTICUT

Department of Public Health

LICENSE

License No. 0052

General Hospital

In accordance with the provisions of the General Statutes of Connecticut Section 19a-493:

New Britain General Hospital of New Britain, CT, d/b/a New Britain General Hospital is hereby licensed to maintain and operate a General Hospital.

New Britain General Hospital is located at 100 Grand Street, New Britain, CT 06050

The maximum number of beds shall not exceed at any time:

32 Bassinets

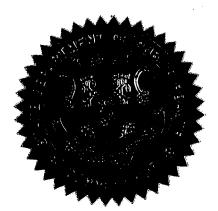
330 General Hospital beds

This license expires December 31, 2006 and may be revoked for cause at any time.

Dated at Hartford, Connecticut, January 1, 2005. RENEWAL.

Satellites

Older Adult Program, 33 Highland Street, New Britain, CT Hispanic Counseling Center, 24 Whiting Street, New Britain, CT New Britain General Hospital Counseling Center, 50 Griswold Street, New Britain, CT Substance Abuse Services, 33 Highland Street, New Britain, CT Kensington Primary Care, 320 New Britain Road, Kensington, CT



I Robert Alvin M.D., M.R.K.



STATE OF CONNECTICUT

OFFICE OF HEALTH CARE ACCESS

CRISTINE A. VOGEL COMMISSIONER

Governor
August 17, 2005

Mr. Claudio Capone Director of Management Systems/Planning New Britain General Hospital 100 Grand Street New Britain, CT 06050

RE: Certificate of Need Determination; Report Number 05-30561-DTR New Britain General Hospital New Britain General Hospital Sleep Lab Expansion in Bristol

Dear Mr. Capone:

On July 29, 2005, the Office of Health Care Access ("OHCA") received your Certificate of Need ("CON") Determination request concerning the proposal of New Britain General Hospital ("NBGH") to establish a sleep lab at 420 North Main Street in Bristol, at a total capital expenditure of \$524,625. On August 12, 2005, OHCA received additional information regarding the above proposal.

OHCA has reviewed the information contained in the request and makes the following findings:

- 1. NBGH is an acute care hospital located at 100 Grand Street in New Britain, Connecticut.
- 2. NBGH proposes to establish a sleep lab at 420 North Main Street in Bristol.
- 3. NBGH's Sleep Lab located at NBGH d/b/a Sleep Disorders Center offers diagnosis of sleep apnea, narcolepsy, restless leg syndrome and periodic limb movement disorder, parasomnia and insomnia. The same services are proposed to be provided at the satellite site in Bristol.
- 4. NBGH will manage and provide all the services needed to operate the sleep lab in Bristol, which will include but not be limited to billing, staffing, equipment and clinical resources.
- 5. New Britain General Hospital and Bristol Hospital will share the neurology group who will oversee the clinical aspects of the program.
- 6. Section 19a-638 of the Connecticut General Statutes ("C.G.S.") states, in part, that the introduction of any additional function or services requires authorization from OHCA.

Based on the above findings, OHCA has determined that New Britain General Hospital's proposal to establish a sleep lab at 420 North Main Street, in Bristol, represents the introduction of an additional function or service, pursuant to Section 19a-638 of the Connecticut General Statutes. Therefore, CON approval is required for NBGH to establish a sleep lab in Bristol.

OHCA considers the submission of information received on August 12, 2005 as the Letter of Intent for this matter; therefore NBGH may file a completed CON application with OHCA between October 11, 2005, and December 10, 2005. The CON application is being mailed to your attention separately.

If you have any questions regarding the above, please contact Paolo Fiducia, Associate Health Care Analyst at (860) 418-7035.

Sincerely,

Cristine A. Vogel Commissioner

Copy: Sandra Bauer, Health Processing Technician, DPH, DCBR



STATE OF CONNECTICUT

OFFICE OF HEALTH CARE ACCESS

CRISTINE A. VOGEL COMMISSIONER

August 17, 2005

Claudio Capone Director of Management Systems/Planning New Britain General Hospital 100 Grand Street New Britain, CT 06050

RE:

Certificate of Need Application Forms, Docket Number 05-30561-CON

New Britain General Hospital

New Britain General Hospital Sleep Lab Expansion in Bristol

Dear Mr. Capone:

Enclosed are the application forms, in paper copy and an electronic copy on diskette, for New Britain General Hospital's Certificate of Need ("CON") proposal for the New Britain General Hospital Sleep Lab Expansion in Bristol with an associated capital expenditure of \$524,625. According to the parameters stated in Section 19a-638 of the Connecticut General Statutes the CON application may be filed between October 11, 2005, and December 10, 2005.

When submitting your CON Application, please paginate and date each page contained in your submission. In addition, please submit one (1) original and five hard copies; as well as a scanned copy of the complete Application, including all attachments, on CD or Diskette. OHCA requests a copy of the submission be in MS Word format and the scanned copy be in Adobe format. Please submit the Financial Attachment and other data as appropriate in MS Excel format.

The analyst assigned to the CON application is Paolo Fiducia. Please feel free to contact him/her at (860) 418-7001, if you have any questions.

Sincerely,

Kimberly Martone

Certificate of Need Supervisor

Enclosures